

1.) CORPORATION NAME:

PREMIER, INC. OF DELAWARE (USED IN VA BY:PREMIER, INC.)

DUE DATE: **9/30/2011**

SCC ID NO: **F1395237**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	12,250,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 13034 BALLANTYNE CORPORATE PL.

CITY/ST/ZIP: CHARLOTTE, NC 28277-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: SUSAN D DEVORE TITLE: CEO & PRESIDENT ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ANNA-MARIE FORREST TITLE: SECRETARY ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CRAIG MCKASSON TITLE: TREASURER ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: MIKE COLLINS TITLE: ASST TREASURER ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: GLENN STEELE, JR. , MD TITLE: CHAIRMAN ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LISA STEIN ASST TREASURER 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL ALKIRE COO 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN WANG DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAN YORDY DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD STATUTO DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT ISSAI DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARK EUSTIS VICE CHAIRMAN 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	J. THOMAS JONES DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS STRAUSS DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NICK TURKAL, MD DIRECTOR 13034 BALLANTYNE CORPORATE PL. CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: WILLIAM MAYER TITLE: DIRECTOR ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHRISTINE CASSEL, MD TITLE: DIRECTOR ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: DENNIS VONDERFECHT TITLE: DIRECTOR ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CHARLES HART, MD TITLE: DIRECTOR ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JAMES HINTON TITLE: DIRECTOR ADDRESS: 13034 BALLANTYNE CORPORATE PL. CITY/ST/ZIP/CO: CHARLOTTE, NC 28277-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ ANNA-MARIE FORREST SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ANNA-MARIE FORREST, SECRETARY PRINTED NAME AND CORPORATE TITLE
3/7/2012 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	